

Volunteer Application

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Availability (circle one)

(Weekdays Daytime, Weekdays Evening., Weekend Daytime/Weekend evenings)

Please list other volunteer experiences

Special Skills

Please describe any special skill that can be applied to our volunteer opportunities

How did you hear about volunteer opportunities with the Detroit Historical Society?

Have you ever been convicted of any offense in violation of the law? Yes No

If yes, please explain:

Have you ever been accused, charged or convicted of any act of neglect, abuse or molestation involving a child? Yes No

If yes, please explain:

References

Please list two individuals who are not family members we may contact as references.

Name

Address

Daytime phone

Email Address

Name

Address

Daytime phone

Cultural Diversity Information

The following information is requested for funding purposes only and is optional

Sex: (circle one)

(Male/Female)

Ethnicity: (circle one)

(African American/Asian/Pacific Islander/Caucasian/Hispanic/Native American/Other)

Please add me to the Detroit Historical Society email list

The submission of this application is an indication of interest in being a volunteer for the Detroit Historical Society and Museums and in no way requires the Society or Museums to us my services.

I give permission for the Volunteer Services department of the Detroit Historical Society to contact the persons listed as references and to complete a background check with this and other information provided.

BACKGROUND CHECK

As an applicant for a volunteer position at Detroit Historical Society, I realize that in order for me to qualify to be a volunteer, I must undergo a background check.

I hereby authorize the release of any information relating to my driving record, criminal history and any additional specific information relating to the position that I am applying for, unless restricted by law. This authorization is made voluntarily, and for the purpose of volunteering only, and information should be given only in response to an authorized request from Detroit Historical Society.

Authorization by:

Volunteer's Full Name (Please Print)

Address (Including city, state and zip code)

Telephone

Date of Birth

Signature

Date

Please send the completed enclosed forms
including a photocopy of your Driver's license to:

Detroit Historical Society
Volunteer Coordinator
5401 Woodward Avenue
Detroit, MI 48202